

Psychological Bulletin

EDITED BY

SHEPHERD I. FRANZ, GOVT. HOSP. FOR INSANE

HOWARD C. WARREN, PRINCETON UNIVERSITY (*Review*)

JOHN B. WATSON, JOHNS HOPKINS UNIVERSITY (*J. of Exp. Psych.*)

JAMES R. ANGELL, UNIVERSITY OF CHICAGO (*Monographs*) AND

MADISON BENTLEY, UNIVERSITY OF ILLINOIS (*Index*)

WITH THE CO-OPERATION OF

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PSYCHOPATHOLOGICAL NUMBER

EDITED BY E. E. SOUTHARD

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THE PSYCHOLOGICAL BULLETIN

GENERAL REVIEWS AND SUMMARIES

GENERAL PSYCHOPATHOLOGY

BY E. E. SOUTHARD

Commission on Mental Diseases, Massachusetts

The reviews and summaries of this number of the BULLETIN are intended to deal with general or theoretical psychopathology such as the large German textbooks on psychiatry set forth in the portions termed *general*, *e. g.*, in that portion of Kraepelin's well-known textbook termed *Phenomena of Insanity*.

Last year a number of pages was devoted to Kraepelin's *Psychiatrie*, 1909-1915, although no complete analysis of that remarkable work could be made. I wish to call especial attention to the part which the concept of infantilism plays in Kraepelin's attempt to resolve the more difficult materials of psychiatry, those, namely, which are taken up in the early part of the fourth volume. Kraepelin approaches the psychopathias with due humility. A particularly interesting discussion stands at the head of Section XVI, on psychopathic personalities. These Kraepelin approaches as forming an intermediary region between undoubtedly morbid conditions and mere personal peculiarities. Kraepelin of course grants that, if all such inborn peculiarities were *sensu strictiori* to be regarded as degenerative, then traces thereof would never be missed in a solitary human being. The truly "morbid" is regarded as a deviation having a considerable significance for somatic or psychic life. Morbidity is accordingly a somewhat arbitrary concept. It has been, according to Kraepelin, the service of French physicians to sharpen our understanding of these morbid trends or constitutions, which Kraepelin likes to call "psychic malformations."

Some psychopathic personalities resemble the maniacal, depressive, irritable, and cyclothymic constitutions, previously described by Kraepelin as more or less thoroughly satisfactory subentities under the general concept of manic-depressive psychosis. Clinical observation is here aided by the fact that the relatives of such persons are often victims of pronounced manic-depressive disorder. Again, many of these persons look in the schizophrenic direction, and these patients may scarcely differ in any recognizable way from victims of dementia præcox in its early phases. Here are the dullards and weaklings, or the "odd sticks" with a variety of peculiarities of thought and action. Again, there are paranoid persons, and there is a paranoid personality which may show no tendency to the formation of a true paranoia. Moreover, there are cases of psychopathic personality that look in the direction of epilepsy, although this field is one difficult to evaluate.

The relations of psychopathia (in this broad sense) and hysteria are still more intimate. It would even be proper to say that hysterics form a subgroup of the group of morbid personalities, in which archaic forms of emotional reaction stand out. Eliminating the manic-depressive tendencies, the mildly schizophrenic, and the epileptic changes, the rest of the field of psychopathic personalities is regarded by Kraepelin as containing a number of developmental arrests of a circumscribed nature. Not only hysteria but paranoia (here Kraepelin refers to the so-called true paranoia and not to paranoid dementia præcox) are perhaps to be better understood if they are regarded as peculiarities closely related with the undeveloped mental life of the child. Hysteria would then be a kind of infantilism in the emotional sphere, whereas paranoia may be suspected to be a kind of infantilism of the higher intellectual functions. But the concept of infantilism is still more broadly used by Kraepelin. There are other permanently abnormal insufficiencies of the personality than hysteria and paranoia, viz., certain insufficiencies termed by Kraepelin *originär*. These conditions—including one Kraepelin terms *nervosity* (neurasthenia and some of the psychoneuroses), *Zwangsneurose* (psychasthenia and obsessive psychoses, and the like), impulsive psychoses (including such forms as pyromania, kleptomania, and the like), and the sex perversions—are treated by Kraepelin separately from the psychopathic personalities on the ground that the former are more pronouncedly morbid conditions. This group exhibits infantilism of the instincts and of the will. In the instance of neurasthenia,

we are perhaps dealing more with an inborn hyperbulia with a retreat from the difficulties of life. In the other forms, such as the impulsive and sexual psychic disorders, we are dealing with a "derailment" of impulses and instincts which are not properly dominated by a well-developed will. Just as imbecility and idiocy represent more or less high-grade *general* infantilism, so these diseased-groups just mentioned form instances of *circumscribed* infantilism. Consequently, there are all manners of intergrading steps between feeble-mindedness and the psychopathias.

I have thought it worth while to bring this matter out in some detail because it seems to prove that a closer relation of all these matters with psychology must be brought about if we are to understand the psychopathias. We may not be able to test metrically these psychopathias at the present time. Still, if they are in any sense infantilisms, we should eventually be able to measure them. As it stands, it would appear that in the large field of feeble-mindedness, we now distinguish over and above idiocy, imbecility, and feeble-mindedness proper (*morosis*, Tredgold; *moronity*) two forms of permanent inborn weakness of mind: a metrically testable form variously termed subnormality, *simplicitas*, *stupiditas*, and the like, and a form not now metrically testable and, as it were, only qualitatively demonstrable weakness. It is this fifth form of feeble-mindedness that is covered in part by the term *constitutional psychopathic inferiority* of some modern workers (*e. g.*, the New York classification of mental diseases). The future of this topic is clearly not in the hands of psychotechnicians performing more and more tests in known ways; but the whole field awaits the characterologist who shall describe the field, and the ingenious worker in the field who shall provide special tests in the field of instincts, emotions, and will.

A piece of practical work related to this matter has appeared in the interesting first number of the new journal, *Mental Hygiene*, to be published quarterly by the National Committee for Mental Hygiene. In a paper on "Unemployment and Personality," H. M. Adler (3) studies paranoid personalities, inadequate personalities, and an emotionally unstable group. The inadequate personalities are, roughly speaking, those that can be proved by available tests to be psychopathic, or persons suffering from a variety of mental diseases with a net effect of lack of judgment and intelligence. The paranoid personalities are egocentric, "limelight" schemers, often contentious, suspicious, and apt to be ingrates. Some 43

cases of unemployed out of 100 cases studied belonged in this paranoid group. The emotionally unstable group contained but 22 cases as against 35 in the inadequate group.

Adler (4) has gone still farther in popularizing the concept of psychopathic personality in a paper in the increasingly useful *Journal of Criminal Law and Criminology*. He summarizes the sub-forms of psychopathic personality as follows: Excitability (*die Erregbaren*) relates to a class of persons often delinquent as the result of some external irritation. The emotional instability of these cases is often combined with supranormality as far as mental tests go. A good many of the histrionic suicides fall in this group. Instability (*Haltlose*) characterizes a second group of (as a rule) fairly intelligent persons whose suggestibility of will is a chief trait. These psychically immature persons need special protection from alcohol. They are especially given to sex difficulties. A third group of persons exhibit a psychopathic trend, and these persons are termed by Kraepelin *Triebmenschen*. Spasmodic will impulses control them. Many of the tramps belong in this group as well as a variety of truants, profligates, and periodic drinkers. A fourth small group are the eccentrics, including the pathological liars and swindlers that have been studied especially by Healy in this country. A fifth group of anti-social persons are adequately intelligent but socially dull, being lazy and untruthful and incapable of any deep emotion. Some of these cases seem to have terminated in paranoid dementia præcox. Prichard's (1835) group of moral insanities belongs here, at least in part. A sixth group of contentious persons are of but moderate intelligence. Adler proposes a system of mental and emotional exercises for the purpose of habit formation, proposing to call this orthopsychics. A beginning at such training in unemployed cases was made under his charge at the Psychopathic Hospital, Boston.

Both journals from which I have just quoted are becoming of special value to psychologists. Reference may be made to Wells (51) on mental adaptation, and to a special article by C. Macfie Campbell (11) on the subnormal child (valuable tables).

Walter E. Fernald (14) gives exceedingly valuable tables illustrating his Waverley work with the mental test, clinical, and pedagogical evaluation of his cases. The fields of study which he evaluates are ten: Physical examination; family history; personal history; school progress; school examination; practical efficiency; economic efficiency; social reaction; moral reactions; psychological tests.

It is of note that both these journals—*Mental Hygiene* and the *Journal of Criminal Law and Criminology*—are often found reviewing the same books, and the drawing together of psychologists, psychiatrists, and practical criminologists is a matter of the not distant future.

Kraepelin has published proposals for a research institute in psychiatry: *Ein Forschungsinstitut für Psychiatrie*, (26), giving certain details as to its extent and cost. The institute should have an auditorium, preparation rooms, library, consultation rooms, photographic rooms, and the like, and be provided with a variety of administrative devices. There should be a clinical experimental division, with wards, a chemical department with eight rooms, a sero-bacteriological division somewhat smaller, and a psychological division with nine rooms, from 20 to 30 square meters. A suite for anatomical investigation follows, and a department for demographic and genealogical investigation, with space for registration rooms, for the director, and the statisticians. A department for animal experimentation, including metabolism cages, is necessary. It appears that plans for such institutions have been in part drawn up by an architect, Kollmann, in Munich, the whole to cost 1,307,000 marks. The cost of operation for the scientific investigators is placed at 62,000 marks, and for the various technicians and clerks, 20,600 marks. The nursing service is planned to cost 27,200 marks; the administrative service, 22,780 marks; a sum total of salaries, wages, and labor, of 132,580 marks. Other expenses are counted as: scientific, 37,000 marks; food and drugs, 29,000 marks, general expenses, 69,100; totalling 135,100 marks. The total annual cost would be, therefore, 267,680 marks.

Kraepelin's communication was forwarded in November, 1915, and he states that the realization of his plan is not to be hoped for immediately.

A large work with multiple authorship on diseases of occupation and vocational hygiene, edited by Kober and Hanson (25), contains a number of chapters of psychological interest. On page 765 is a description of the Milan clinic for occupational diseases, written by its director, Professor Devoto. The clinic is in the center of the hospital district of Milan, and contains a great variety of laboratories, including in one institute anatomical, X-ray, chemical, bacteriological, and physiopathological laboratories, including space for the study of experimental fatigue. The clinic cost over a million liras. There are 110 beds. A special and active propa-

ganda of hygiene is carried on amongst the working classes. The chapters on fatigue and upon the occupation neuroses, the former by F. S. Lee, containing some information of psychopathological interest.

Several thick numbers of *Revue Neurologique* are devoted to the neuroses and psychoses of the war. There are elaborate set discussions of special questions, largely of a practical and clinical nature. The majority of studies appear to deal with meningeal and peripheral nervous conditions, with a more moderate number of studies of encephalic lesions. These latter deal chiefly with special neurological questions. Among the neuroses, such questions as those of conscious epilepsy, hysterical euphoria, dream states related to the war, and the like appear. The simulation question is treated by Pitres and Marchand, who show that meningitis, paresis, cerebellar lesions, multiple sclerosis, and tabes, may be imitated. The pension question is also considered.

The special work of the military neurological centers is dealt with (pages 603 to 749, November and December number), following which is an account of a conference of the 15th of December, 1916, in which leading neurologists took part. The reports from Marie's clinic at the Salpêtrière are especially full. Marie and Foix have studied especially synkinesia in hemiplegics. They distinguish from the most frequent form of spasmodic synkinesia a form termed imitative, in which patients attempt to facilitate the execution of movements by the subconscious execution of the identical movement on the other side. Another form of synkinesia is the condensation form so-called, in which the voluntary contraction of certain muscular groups leads to the involuntary synkinetic contraction of muscular groups that are functionally synergic with these. This form of synkinesia tends to reproduce the great synergias that characterize normal life, and accordingly seems to throw into relief the automatism of lower centers. This synkinesia of condensation is an active contraction of associated muscles whose determining cause is, according to these authors, spinal automatism. The spinal cord involuntarily executes those complex movements whose paths have been traced most frequently in the individual and in the species.

Marie and others have studied topographical questions with a particular technique. Babinski's clinic at the Pitié has dealt especially with reflex contractures and paralyses, with hysteria, and with organic paralyses. Babinski maintains that his con-

ception of hysteria (pithiatism) has been upheld by the cases developed in the war.

Laignel-Lavastine deals with the center for psychoneuroses of the Parisian military government, an establishment created by Ballet in 1915. This center has now 550 beds, and at the time of the report eight publications had been made therefrom. Shell shock may run through an initial stage of confusion of various degrees. Organic nervous symptoms may or may not follow. Post-confusional mental phenomena are common. Such are amnesia, dream states, hallucinatory psychoses, depressions, with anxieties, phobias, and the like. Hysterical sequelae may then occur, with a variety of "illegitimate functional manifestations," such as exaggeration, simulation, and the like. Theatrical reactions in certain soldiers are mentioned. There is some simulation of feeble-mindedness or dementia. Decorations are sometimes illegally carried by psychopathic persons. Nervous and mental attacks occurred in certain soldiers upon the occasion of anti-typhoid vaccination. The group of persons recognized by the French as constitutional abnormals are also of importance, to say nothing of the more well-recognized functional disorders, such as hysteria, phobogenic syndromes, and the like. From the neurological center of the third district, second sector (Dr. Francais), come reports on hysterical deaf-mutism and paralyses, as well as upon the organic effects produced by shells that make no external wound.

The library of the psychologist must be enriched by a number of books, such as Weidensall's *Mentality of the Criminal Woman* (50), White's *Mechanisms of Character Formation* (52), Davenport's *The Feebly Inhibited; Nomadism; Inheritance of Temperament* (12), Glueck's *Study in Forensic Psychiatry* (16), Healy's *Mental Conflicts* (20), besides several translations of works in the psychoanalytic group.

Weidensall's study of the criminal woman is based upon 88 cases examined at the Bedford Reformatory, and their histories were compared with those of 20 college girls, on the one hand, and the norms for working girls in Cincinnati previously worked out, on the other hand. Weidensall says that she thinks that perhaps one woman in five of the prostitute group sent to Bedford would grade up with the better type of saleswoman; perhaps one in four may equal the average housemaid or laundress; but that the remainder, a small majority of all cases, are inferior.

White's *Mechanisms of Character Formation* makes much use

of the theory of Alfred Adler concerning organ inferiority, which however he regards as more a tool of analysis than one of therapeutics. As is always the case with White's work, the various concepts made familiar in the psychoanalytic literature are given a skilful and clear-cut exposition. The richness of the unconscious life and its wish tendencies, the ambivalence in all lives, symbolism, the family romance, the concept of so-called "partial libido trends," the introverted type, the regressive and progressive trends of the libido, are here considered.

Davenport takes us into another field. Although the prime interest in his work is in heredity and the Mendelian variety of heredity studies, yet the work debouches into things of great psychological interest. Nomadism, or the wandering instinct, is "a fundamental human instinct which is, however, typically inhibited in intelligent adults of civilized peoples." Davenport believes that the defective inhibition of this instinct is inherited ("probably a sex linked, recessive, monohybrid trait"), appearing as a rule in males, transmitted through the mother and skipping a generation. Daughters become nomadic, according to these studies, only when the mother belongs to a nomadic stock and the father is also actually nomadic. On the other hand, violent temper is transmitted in another way. This trait is not sex-linked, but is a positive and dominant trait appearing in every generation. Psychologists have commented on the fact that Davenport has here proposed a new instinct, regarding the hunting instinct of James and others as an outgrowth of the wandering instinct. Davenport's study of the inheritance of temperament borrows from the reviewer (who took the terms in turn from Wernicke) the terms *hyperkinetic* and *hypokinetic* for certain temperaments, indicating feeble inhibition. Davenport regards hyperkinesis as due to a loss of normal inhibition, explaining hypokinesis as the result of over inhibition. Partly because of possible confusion in the sounds of the two words (hyper- and hypokinesis), the reviewer prefers to follow Wernicke in contrasting hyperkinesis with *akinesis*. In a communication to be read at the 1917 meeting of the American Psychopathological Association, the reviewer treats, in a more general way and without reference to heredity, the topic of hyperkinesis, pointing out that we are dominated by the scholastic notion of causation (*causa aequat effectum*) to the extent that we often feel that over-activity must be due to something superadded in the organism. The reviewer goes on to point out that "hyperkinesis

by defect" is an exceedingly important variety of overactivity, both in the field of neuropathology and in that of psychopathology. His studies would indicate that the exaggeration of the knee-jerk when cerebral inhibitions are removed by spinal section, is to be subsumed under the same general caption as a great many instances of epilepsy occurring in subjects with brains simplified ("decomplicated") by disease. Akinesis, on the other hand, although it may often be due to the lack of something which would permit the organism to remain a going concern, is also often produced by the excess of something, by something superadded in the organism. In confronting instances of over- or under-activity, the analytical student should consider in turn whether his given example of hyperkinesis is hyperkinesis by defect or by excess; and the same process is of value in the analysis of akinetic phenomena. It appears to the reviewer that the term *hyperkinetic* as used by Davenport, whether or not the heredity studies of Davenport are final, is a term which ought to remain. Under the influence of German psychiatry, practical psychiatrists are of course endeavoring to use the words *mania* and *hypomania* for much which the term *hyperkinesis* much better covers. The more behaviorism comes into its own, the more should we deal in analyses of hyperkinetic and akinetic phenomena, to say nothing of the so-called parakinetic phenomena in which there is neither over-activity nor under-activity from the organism's point of view, but only a perversion of activity, whose purpose and not whose amount is unusual.

Glueck's studies in forensic psychiatry are in the German manner. His cases are interestingly presented, particularly the cases of litigious paranoia, malingering, and kleptomania. The first chapter deals with psychogenesis in the psychoses of prisoners, and gives promise of dealing in a psychoanalytical manner with the whole problem. However, the remainder of the work does not follow this line at all exclusively. The book is written in a very lively and condensed style, and should certainly be followed by numerous others which will give a psychiatric trend to modern criminology.

Healy's book on mental conflicts fails to give a thorough definition of the term *mental conflict*, and the reviewer gathers from personal communication that Healy regards such definition as not particularly necessary. In the reviewer's opinion, however, the fundamental nature of psychomachy has not been made clear. The most concrete analogue which the specialists in so-called mental

conflicts can bring is the Sherringtonian notion of competition in innervation of antagonistic muscle groups. It is a pretty far cry from the competition between extension and flexion to intrapsychical conflicts. It is to be hoped that psychiatrists will in future try to give an exact definition of mental conflicts. Meyer, in a review of Glueck's book, speaks of an "analytic psychodynamic interest" that is more and more characteristic of American psychiatry. Nothing is more the cynosure of every psychodynamic eye than mental conflicts. The science of psychomachology ought to be laid down on solid ground. Up to date, we have little more than ethical theories, such as would be quite within the range of understanding of eighteenth century moralists.

Last year a review was presented of Hinkle's translation of Jung's *Wandlungen und Symbole der Libido*, somewhat puritanically translated as "the psychology of the unconscious." The war has prevented much Austrian progress in the Freudian and allied doctrines, and here in America we are somewhat breathlessly catching up with the situation in a succession of translations. Brill has translated Freud's *Wit and its Relation to the Unconscious*, following his translation of *Selected Papers on Hysteria and Psychoses* (1912), *Three Contributions to the Theory of Sex* (1916), *The Interpretation of Dreams* (0000), *Psychopathology of Everyday Life* (—). It appears that translations of further works of Freud, notably *Totem and Tabu*, are in preparation.

A valuable book is the translation by C. R. Payne of Pastor Pfister's book (32) on the psychoanalytic method, published originally in 1913. Pfister remarks that criticism hostile to analysis (the psychoanalysts commonly refer to *psychoanalysis* as *analysis*) suffers from a fatal disease which he calls ontophobia, or fear of the facts. This author, like many other psychoanalysts, constantly refers to the repulsion which many workers at first feel to psychoanalytic "facts." It has been the reviewer's experience, however, that various students of his acquaintance feel no repulsion whatever to the so-called "facts" and slip into implicit and thoroughgoing belief in the Freudian interpretations as "facts" altogether too easily. There is something which deserves only the term hugger-mugger about this line of critique of the opponents of Freud. We must concede at least this measure of ingenuity to the Freudian propaganda, namely, that hardly any other propaganda has dared to say that initial disbelief in the doctrine is an argument for the truth of the doctrine. On the whole, this book

of Pfister, while not the product either of a physician or of a psychologist, appears to be one of the best of all the expositions of Freudism.

A somewhat unsatisfactory section on the psychoanalytic conception of the unconscious (referring very summarily to a few German authors) is followed by more careful study of repression and fixation processes, and the concept of retrogression. Part 2—pages 429 to 580—deals with the technique of psychoanalysis, including abreaction, compensation, transference, details of educational work, special field of pedanalysis, and the results of psychoanalytical treatment. Pfister (page 513) decries the use of psychoanalysis as a social sport, and believes that the true psychoanalyst can enter his work only in a state of earnest and exalted responsibility. Women are perhaps better psychoanalysts of the first years of childhood than men. "An analyst who believes himself persecuted, is unhappy in love, or morally uncertain, would be in an extremely difficult position and would do better, if he does not possess extraordinary self-control, to interrupt his analytical work until his personal relations are arranged" (page 517). Should this dictum of Pfister be followed with respect to the matter of feelings of persecution, it would appear that a good many modern practitioners in psychoanalysis would have to cease their work. It seems that much of the mutual criticism of Freud and Jung falls little short of ideas of mutual persecution.

Freud's familiar work on Leonardo Da Vinci (15) has also been translated by Brill. Leonardo was an illegitimate child, who, without a father, "surely must have entered into a phase of infantile sexual activity," etc.

Under the title "Analytical Psychology," various papers of Jung (24) have been translated by Dr. Constance E. Long of London, who rightly states that we just at present need a "new philosophy of life to take the place of that which has perished in the general cataclysm." Dr. Long goes so far as to see in Jung's analytical psychology based upon "a scientific study of the unconscious, the germs of a new construction." Jung himself contributes from Zürich a preface, in which he states that the Vienna school (that of Freud) takes the standpoint of an exclusive sexualistic conception, while that of the Zürich school is symbolistic. The Vienna school, according to Jung, interprets the psychological symbol as a sign of certain primitive psychosexual processes. The Zürich school admits that one may thus interpret symbols

upon an exclusively sexual basis, but denies that the Viennese point of view is the whole truth. Symbols for Jung have not merely a semiotic value but a positive value, "for to the Zürich school the symbol is not merely a sign of something repressed and concealed, but is at the same time an attempt to comprehend and to point out the way to the further psychological development of the individual." Symbols are not merely retrospective but prospective. Whereas Freud is merely analytical and devoted to the discovery of causes, Jung claims to be synthetic and prospective, dealing with the future aims of the human mind. Freud, Jung hints, is a hedonist, a scientific materialist; whereas the psychology of power and the corresponding philosophy of Nietzsche are to be preferred. According to Jung, the principles of Adler are opposed to those of Freud, being founded not upon a hedonistic principle but upon the principle of power. As for Jung, he regards the hedonistic views of Freud and the Nietzschean principle of Adler as equally one-sided. To be sure, a given example of diseased mental attitude may perfectly illustrate either the Freudian or the Adlerian psychology, according to whether the patient's difficulty revolves about his sexual desire or his desire for power. Within the limits of a given case of inner dissociation neuroses, the Zürich school is perfectly willing to reduce the phantasy products of a patient to a fundamental infantile hedonism, on the one hand, or to a fundamental infantile desire for power, on the other. For Jung, the fundamental thoughts and impulses of the unconscious are symbols indicating definite lines of future development. To be sure, there is "no scientific justification for such a procedure." "Psychology essentially cannot be exhausted by causal methods only, because mind lives by aims as well." The real argument for the Zürich position, according to Jung, is the argument for vital necessity, for "it is impossible to live according to the intimations of infantile hedonism, or according to a childish desire for power. If these are to be retained, they must be taken symbolically." Along such lines, Jung seeks to evolve the truly philosophic or religious attitude. Newer and newer symbols take the place of the old. A new symbol may lead to "constructive truth." In the unconscious when we probe it, according to Jung, we find instead of modern symbolism, an antiquated, archaic view of the world and life.

The book itself contains translations of papers on the psychology and pathology of so-called occult phenomena, the association

method, as well as the more pronounced psychoanalytic papers of Jung. The father complex, enuresis as a sexual surrogate, the significance of number dreams, are taken up. There is an interesting criticism (chapter 6) of Bleuler's theory of schizophrenic negativism. The fluidity of terms is emphasized by the fact that Jung seems to identify schizophrenia with psychoneurosis (page 205). According to Jung, the autism of Bleuler (withdrawal into one's own phantasies) is precisely the autoerotism of Freud, and is what Jung had previously termed the overgrowth of the phantasies of the complex. According to Jung, Bleuler's negativism runs as follows: *a*, the autistic retirement of the patient into his own phantasies; *b*, the existence of a life wound (complex) which must be protected from injury; *c*, the misconception of the environment and of its meaning; *d*, the directly hostile relation to environment; *e*, the pathological irritability of schizophrenics; *f*, the "press of ideas" and other aggravations of action and thought; *g*, sexuality with its ambivalency and emotional plane, often one of the roots of negative reactions. Jung believes that the so-called resistance is at the bottom of the negativism. Thus, one's withdrawal into his own phantasies is coincident with an increase of resistance. In point of fact, one's autistic retirement is identical with the existence of one's complex; at least, the existence of the complex and the occurrence of the egocentricity are reciprocals of one another. If you have a life wound, or so-called complex, this life wound of necessity calls for autism (autoerotism, introversion). Again, misconception of and hostility to the environment are incidental to resistance, and the irritability of schizophrenics is due to nothing but a damming up of the affect (that is, a damming of the libido) that ensues upon increased resistance. Neurasthenia being a classical example of such damming up of affect, is accordingly not different from schizophrenia. (Of course, psychiatrists in general would be loath to grant that neurasthenia is at all identical with schizophrenia; but Jung would probably say that non-institutional cases of schizophrenia are often nothing but neurasthenia.) As to the press of ideas and paralogic of the thought processes of the schizophrenic, Jung believes that the "painfulness of the elaborated complex necessitates a censorship of its expression." Not only are neurasthenia and other psychoneuroses identical with schizophrenia, but if you pay deep and concentrated attention to something, you may conjure up ideas "as like as two peas to the phantasies and expressions of schizophrenia." When this article

was written, Jung held that resistance always springs from a peculiar sexual development, and Jung was at this time disturbed by the views of Bleuler, who would allow to sexuality only a "quasi determining influence on the phenomena of negativism." In a contribution to the study of psychological types (1913), however, Jung characterized hysteria as illustrating a centrifugal tendency of the libido, whilst in dementia præcox the tendency is centripetal. However, the centripetal tendency of libido is soon hampered in actual life and forced to regress; the victim of dementia præcox, at first self-withdrawn, later may become extravagantly aggressive. Extraversion and introversion are the terms chosen by Jung for these two tendencies of the libido. "We say that he (the patient) is extraverted when he gives his fundamental interest to the outer or objective world. . . . He is introverted, on the contrary, when the objective world suffers depreciation . . . for the sake of the exaltation of the individual himself who . . . grows to believe no one but himself worthy of consideration." Jung wishes to term regressive extraversion the phenomenon called by Freud transference, in which the hysteric projects his illusions into the objective world. He wishes to term regressive introversion, the characteristic process in dementia præcox, in which the subject himself undergoes phantastic transfiguration. According to Jung, who in several places exhibits evidence of considerable acquaintance with James, the James distinction of the tough-minded and the tender-minded is quite in accord with the spirit of psychoanalysis. Thus, the tough-minded of James are the extraversionists of Jung; and the tender-minded of James are the introversionists of Jung. The classicists and romanticists are these same extraversionists and introversionists once more. Jung ascribed to Nietzsche a similar contrast between the Apollians and the Dionysians. The contrast at bottom is that between a dream and an intoxication. In the dream, the individual is shut up as in introversion; in intoxication, extraversion takes place. Within the field of psychoanalysis itself, Jung points out the centrifugalist, Freud, and the centripetalist, Adler. Freud's theory is essentially pluralistic, causal, sensualist, empiricist; Adler's theory is philosophical, finalistic, teleological. As Freud's typical patient seeks centrifugal satisfaction by infantile transference, projecting phantasies into objects and transfiguring them, so Adler's typical patient provides safeguards for himself in the "virile protest" in an affirmation of dominating ideas. It is in this chapter (11), that we perhaps see the first striking evidence

of the split which was to come between Jung and Freud. A further chapter on the psychology of dreams, prepared for the Berne Medical Congress of 1914 but postponed on the outbreak of war, maintains that the value of dream symbolism varies according to whether you adopt the Freudian standpoint of causality or the Adlerian standpoint of finality. According to Freud's causal viewpoint, it proceeds from a craving, namely, from the suppressed dream wish, which dream wishes are able to disguise themselves under manifold forms. Long objects dreamed of, for the Freudian school, are phallic symbols. On the other hand, from the viewpoint of finality, different dream pictures have different and peculiar values. Diversity in the dream's mode of expression is extremely significant. For the practical development of the individual, the finality viewpoint, according to Jung, is singularly important, despite the fact that the causality viewpoint seems at first sight more scientific. On page 288 occurs a footnote, apparently by the translator, as follows:

"In Freud's writings, the term 'libido' has always a sexual meaning. But it is well known that Jung has restored to this term its classical meaning of desire or passion in general. He has pointed out recently that we might, following Claparède's proposal, translate it by the word 'interest.' We have preferred in the present translation to keep to the term 'libido' to express the instinctive psychological effort, the *élan vital*, the joy of living, the fundamental interest of the individual, etc."

Adler's book (2) on the neurotic constitution has been translated by Glueck and Lind. The considerations go back to a study on the inferiority of organs, published in 1907, wherein Adler thought that he had discovered "a remarkable relationship between somatic inferiority and somatic psychic over-compensation." The fundamental viewpoint of Adler is, accordingly, that "the realization of somatic inferiority by the individual becomes for him a permanent impelling force for the development of his psyche. Philosophically there results from this a reinforcement of the nerve tracts, both qualitatively and quantitatively, whereby a concomitant inferiority of these tracts is enabled to reveal in a composite picture its tectonic and functional pictures." By psychological investigation and analysis, one may disclose the psychic phase of these compensatory and over-compensatory processes. Adler is thus dealing with a kind of relationship between organic and psychic disease states. There are many examples in the medical literature

of such relationship; for example, the asthenic habitus; Ponfick's exudative diathesis; Heubner's lymphatism; and the Hess-Eppinger vagotonia, to give only a few examples. According to Adler, "the inferior organs constantly endeavor to make a very special demand upon interest and attention." Inferiority of an organ "constantly shows its influence on the psyche in action, in thought, in dreams, in the choice of a vocation, and in artistic inclinations and capabilities." For example, "A defective digestive apparatus will be accompanied by a greater psychic capability in all nutritional directions, as gourmandism, acquisitiveness, stinginess, and greed."

The book contains many references to the craving for security (*Sicherungstendenz*), on the one hand, and the masculine protest (*Männliche Protest*), on the other. Thus (page 99), the neurotic's striving for security can only be understood when the original contrary factor, his uncertainty, is considered. "In the analysis of psychoneuroses it always becomes obvious that this antithesis resolves itself in accordance with the only real 'antithesis of man—wish' so that the feeling of inferiority, uncertainty, lowliness, effeminacy, falls on one side of the table; the antithesis, of certainty, superiority, self-esteem, manliness, on the other. The dynamics of the neuroses can therefore be regarded . . . as if the patient wished to change from a woman to a man. This affect yields in its most highly colored form the picture of that which I have called 'masculine protest.'" Numerous elaborations of these ideas appear. For example (page 406), homosexuality "is the result of the fear of the opposite sex."

Poul Bjerre presents a book (6) on history and practice of psychoanalysis, Chapter 7 of which contains a long extract from a case history in which Bjerre was successful in "dissolving analytically a strongly constituted system of persecution of 10 years' standing, and in giving the patient (an unmarried woman of 53 years of age) complete comprehension of her illness." The book starts with Kant's fixation of the fundamental fact of psychotherapy from his attacks of gout. It was his book on the power of the mind through simple determination to become master over morbid ideas which crystallized in von Feuchtersleben. A chapter on Wetterstrand and the Nancy School follows; after which the development of psychoanalysis is taken up. This book, favorable to the cause of psychotherapy, and in general favorable to psychoanalysis, forms one of the most amiable and welcoming of all the books of this group.

The collected contributions, Third Series, 1915, from the Massachusetts State Board of Insanity and the State Institutions for Mental Disease and Defect contain various papers on mental tests; for example, a programme and directions for mental examinations of asocial, psychopathic, and doubtful subjects (Hardwick (19)), mental tests and social status (Yerkes and Anderson (54)), two psychological studies of criminals, Rossy (38, 39). The reviewer (45) has attempted to show that histology may prove of some service in getting at the mechanism of certain cases of hallucination, and in another paper (46) gives some data concerning delusions of personality, with a note on the association of Bright's disease and unpleasant delusions. When this latter paper was first presented at a meeting of the American Psychopathological Association, Jelliffe suggested that it might have some relation with the Adlerian concept of organ inferiority.

Myerson (29) presents an interesting analysis of hysteria as a weapon in marital conflict. Myerson (30) also presents a careful review of the conditional reflex theories of Pawlow.

Interesting speculations as to the difference between carnivorous and herbivorous types are presented by Bryant (8).

The American neurological and psychiatric literature contains some papers of psychological interest. From the *American Journal of Insanity* may be mentioned Prof. Pierce Butler's (of Tulane) address (10) to the American Medico-Psychological Association on stage-mad folk in Shakespeare's day. Rosanoff (37) deals with the old question of the relationship between genius and insanity. William Cowper is described as pretty certainly a manic-depressive, and some of his verses would never have been written, according to Rosanoff, if Cowper had not been insane. Mayer, the discoverer of the law of the conservation of energy, is another manic-depressive. Flaubert is described as an epileptic. Burr (9) describes pictorial art of the insane as very largely emotional, frequently erotic, often subtly symbolic.

Another article, in part a translation, by Beryl Parker (31), on the psychographs of Rossolimo, details a method of securing so-called psychic profiles characteristic of various forms of disease and other conditions. These graphic profiles deal with attention, will, perception, memory, comprehension, construction, mechanical sense, imagination, and observation.

In Myerson's 132-page article (28) entitled, "Psychiatric Family Studies," he appears to show that paranoid conditions in

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the ancestors breed dementia præcox in the descendants. Again, though not so clearly manic depressives are followed by manic depressives. Should these conclusions be maintained, clearly a study of mental traits in normals, or apparent normals, would be of the greatest importance. On account of the difficulty of evaluating the normal mentality of the senile period it would appear that much psychological work might well be done in this field. Incidentally, Myerson believes that "all roads seem to lead to dementia præcox, and from thence to imbecility." No genius and no high-grade talent has appeared prominently in any of the family groups studied, despite the fact that these groups appeared in a district from which talented persons have spread out.

Farrar (13) presents observations upon the Canadian expeditionary force. Farrar states that severe war neuroses may perhaps develop in quite normal persons; at least, competent observers have so asserted. Farrar considers that the concept of normal is so elastic that we may never get a definitive answer to this question. At all events, the majority of severe war neuroses occur in persons where there is evidence of "psychopathic potential." Exhaustion and fatigue do not appear to have causal importance with respect to the neuroses or psychoses. Aside from accidental diseases, there is a reactive group of psychoneuroses. Among these are anticipatory neuroses and trench-neuroses, the type of which latter is shell-shock. The trench neuroses occur as a rule in unwounded soldiers; in fact, some persons believe that on the basis of contemporary military experience, we should give up the concept of so-called traumatic neuroses. On the whole, the war neuroses are probably psychogenic.

From the *Journal of Nervous and Mental Disease* for 1916, may be mentioned the reviewer's paper (44) on mental symptoms in paresis, according to which paper, cases with mild lesions were the most hyperkinetic and difficult to handle. They were far more apt to show resistiveness, violence, destructiveness, refusal of food, and delusions concerning the environment. On the other hand, the cases with most marked atrophy, as a rule of the frontal region, were those which seemed the happiest, tending more to euphoria, exaltation, or expansiveness, than did the others. Another curious result of this study was that such symptoms as amnesia and dementia did not appear to be more frequent in cases with severely injured brains than in those with milder injured brains, a finding which possibly indicates that much of the picture of grave deterioration in general paresis is functional.

Bronner (7) pleads that physicians should know something of general and applied psychology, pointing out certain errors on the part of more or less prominent psychiatrists. Schmitt (40) pleads for coöperation between psychologist and physician, pointing out the failure by family and teachers to recognize high-grade types of mental defect, the frequent lack of recognition of sensory defects, the occurrence of special interests leading the child to deviate from conventional social life, and certain cases of diffidence.

An interesting paper by James J. Putnam (35) upon acroparesthesia abounds in reference to the causal nature of neuroses, and speaks clearly and consciously of changes of point of view in 40 years of observations, with a general tendency to a more functional point of view.

J. J. Thomas (49) describes neurological cases seen at a base hospital.

The *Journal of Nervous and Mental Disease* presents translations of Higier's vegetative neurology (21), a continuation of a translation of Maeder's dream problem (27).

Interesting psychopathological papers appear in the *Journal of Abnormal Psychology*. The term *abnormal* is broader than the term *psychopathological*, since, for example, geniuses would be included under the head of abnormal. This well-known journal excludes ordinary clinical psychiatric material. Brief mention may be made of an elaborate study of quintuple personality by Walter Franklin Prince (33); papers on dreams by Horton (22, 23); studies by Meyer Solomon (42, 43); a paper on the utilization of psychoanalytic principles in the study of the neuroses by Putnam (36); and one upon dementia præcox and the infantile mode of reaction by Douglas Singer (41). Singer regards as the most characteristic dementia præcox reaction the substitution of dream phantasy for reality. Dementia præcox is not truly an arrested development, but is a development along faulty lines.

Grabfield (17) presents a study of variations in the sensory threshold for faradic stimulation in psychopathic subjects, being the method devised by Prof. E. G. Martin and systematically employed in the admirable alcohol studies of Dodge and Benedict. Grabfield finds expression the normal sensitivity in a case of traumatic neurosis and in certain cases of occupation neuroses.

Haines (18) presents a somewhat elaborate analysis of the genesis of a paranoic state, analyzing the case from a variety of points of view, such as those of Bleuler, Meyer, and Kraepelin.

Haines queries how far the psychopathic tendency in this case could be corrected by what he calls mental orthopedics (a term reminding one of a term proposed by H. M. Adler: *orthopsychics*).

The proceedings of the American Psychopathological Association's seventh annual meeting (34), held at Washington, May 11, 1916, are presented in the February-March number of the *Journal*. The main feature of the programme was a symposium on dementia, in which perhaps the most suggestive communication was by MacCurdy on epileptic dementia.

The Psychological Clinic, aside from the usual array of papers on feeble-mindedness and tests, contains some work of directly pathological interest. Witmer (53) presents a paper on congenital aphasia and feeble-mindedness. It appears that there are some persons that have what may be called congenital aphasia or alexia, who are precisely with respect to speaking and reading in a position of persons without ear for music, who therefore would be examples of congenital amusia. Persons with such specialized defects are of course proper subjects for special classes.

Bisch (5) presents in the May number (1916) of the *Journal of the American Institute of Criminal Law and Criminology* an account of a police psychopathic laboratory, detailing some experiences from the City of New York.

Of some interest to psychopathologists is a portion of an article by the reviewer and Canavan (47) on finer cortex changes in dementia præcox. The earlier German claim based upon preliminary observations by Alzheimer, that the cortex changes in dementia præcox, particularly in catatonia, were in the deeper layers of the cortex, has now been reversed. It is now thought to be better established that the upper layers of the cortex bear the brunt of such changes. The histological work of the paper above mentioned deals with technical questions, but in the body of the paper is presented a brief analysis of the functional probabilities concerning what may be termed the supra-cortex and the infra-cortex respectively. On the whole, the reviewer felt that such phenomena as hallucinations and catalepsy were related to disease of the lower layers, but that schizophrenic effects, such as are shown in paranoid cases of dementia præcox, are to be related more with disorder in the supra-cortex; that is, in the more recently involved portion.

E. Stanley Abbot (1) presents a paper on the mechanism of paranoia, concluding that paranoia stands nearest in the normal life to prejudice.

In a paper on the application of grammatical categories to the analysis of delusions, the reviewer (48) calls attention to the value of attempting to express the relation between the world and the individual from the individual's point of view. From the point of view of the individual, the self is either active or passive in relation to the environment, and in any given case of behavior this self-activity or self-passivity is as a rule demonstrable because the organism is polarized in one direction or in the other. But the so-called reflexive or middle voice of grammar also finds its analogue in the mental life, seeing that almost equally important to the individual are his relations to himself. Once more the reflexive relations of the self break out into a group in which (to use the expressive terms of James) the *I* dominates the *me* and the *me* dominates the *I*. Another suggestion concerning the nature of delusions is derived from the grammar of the moods. The reviewer feels that we may distinguish pragmatic delusions from phantastic delusions; the former are such delusions as are not *prima facie* absurd and whose truth or error can be determined only by recourse to the facts or through the passage of time. Phantastic delusions are *prima facie* in the given context absurd. The pragmatic delusions are somehow precipitations of an *if* or a *since*; phantastic delusions are, as it were, precipitations of a *would that*. It may be that human characters in general are determined along these two lines. Perhaps indeed, the distinction corresponds to the familiar one of James: between the tough-minded and the tender-minded.

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SPECIAL REVIEWS

Wit and its Relation to the Unconscious. S. FREUD. (Trans. by A. A. Brill.) New York: Moffat, Yard, 1916. Pp. vii+388.

When Freud's work on wit was published in 1905, his psychology was not as well known to English-speaking students as it is now, and the book was ponderous and forbidding. An epitome of it fifty pages long was given by Brill in 1913 in the last chapter of his "Psychoanalysis." But although reference is made to it occasionally

in the literature, it is safe to say that the book is still relatively unfamiliar, so that the present translation is likely to prove useful, and perhaps even the following report.

The whole work is divided into three parts, entitled respectively Analysis, Synthesis and Theory. The first part contains an Introduction in which the author surveys current theories and finds them wanting; various attributes and criteria are given, but they are not organically connected, we do not know whether all must be applied, or only some of them. Freud seeks an organic point of view, and this is one, and probably the greatest, merit of his undertaking. Apart from this Introduction each main division of the work subdivides into two chapters. Analysis treats of the technique and the tendencies of wit; synthesis of its pleasure mechanism and its motives; theory of its relations, first, to dreams and the unconscious, and, secondly, to forms of the comic. The work is thus systematic, and it is fairly long, a treatise, not an essay.

Freud begins with examples. His method is inductive. His collection of *facetiae* is extensive and varied. He aims to include every kind of wit and succeeds, he believes, in including at least all the commonest and most important kinds. There is room for difference of opinion as to the degree in which some of the stories and sayings given are "really" witty, for the German *Witz* does not seem to correspond exactly to the French *esprit*, or to all the varieties of meaning of the English "wit," and each age, as well as each country, has its own standards and preferences. On the whole there is little to complain of in Freud's selection on the score of comprehensiveness. Much in this part of the work is highly entertaining. On the other hand, the explanatory analyses seem at times needlessly prolix, as when, for example, seven pages are taken up with the elucidation of a story the quite obvious point of which lies in the use of the portmanteau word *famillionnaire*. The result of the investigation into the technique of wit is the discovery that the chief category of word-wit is condensation, and that in all its forms it exhibits a tendency to economy; that thought-wit is characterized by displacement and substitutive formations, such as faulty thinking, indirect expression, absurdity and representation through the opposite; and that, consequently, the mechanism of wit bears a striking analogy to that of dreams.

In the next chapter analysis deals with the distinction between harmless, or abstract, wit and tendency-wit, that is, wit in the service of a purpose. The former is held to be more instructive for

the explanation of the nature of wit, the latter, however, is especially important for the light that it throws on the pleasure-producing mechanism of wit. Freud distinguishes four main kinds of tendency-wit, the obscene, the hostile, the cynical and the skeptical, each of which he subjects to careful and interesting analysis. The important conclusions are, first, that the enjoyment of wit depends on its technique, and, secondly, that it depends on its tendency. The problem then is, in what point of view can these utterly different sources of pleasure be united? With this question we pass from analysis to synthesis.

The solution of the problem is found in the conception of "economy of psychic expenditure." We recall that a tendency to economy was discovered as the characteristic feature of the technique of word-wit; we now observe that economy is the source of pleasure in all wit. The case is clearest in tendency-wit. Here the principle of economy is seen at work in the evasion by means of the wit of hindrances, external or internal, to the expression of the tendency. Impulsions whose direct expression at the present stage of civilization would entail unpleasant consequences are psychic energy which is no longer required when the impulsion is repressed; but repression, inhibition, involves an expenditure of satisfied in a form which avoids the unpleasant consequences. The secret of the pleasurable effect of tendency-wit, then, lies in "economy in the expenditure of inhibitions or repressions." But the same principle applies also to harmless wit. Here there is relief from the higher demands of reason. Wit as to its technique appears as an inferior achievement of mental activity. In certain forms of harmless wit we find the same play on words, the same following of external associations, that we meet with in abnormal patients and in children. In others with a different technique pleasure arises in recognition of the familiar. Outside of the wit-work this inferiority may excite displeasure. The peculiarity of the technique of wit lies in the safeguarding of this source of pleasure against the protest of reason. From this point of view Freud suggestively indicates the process of the genesis of wit through play and jest to the most subtle forms of tendency-wit. It now appears that the pleasure in the latter is enhanced by a double economy; there is the "fore-pleasure" due to the economy of the technique of the wit which serves to escape the repression, and there is the pleasure due to the economy in the release itself.

This brings us to the motives of wit. Besides the pleasure-

motive, there are others, some hard to discover, and Freud devotes a good deal of space to their elucidation. But we need not follow him here. The essential point is that wit is a social process. No one is satisfied to make wit for himself alone; he desires to impart it. In imparting it he causes inhibition to become superfluous in the hearer; the repression is discharged in laughter. The principle of economy thus appears in a new light. The original pleasure was derived from simple economy of expenditure, but with the development of play into wit the tendency to economy shifts its goal. New and increased sources of pleasure are opened up. The case is analogous to that of the business man who, having but a small trade, makes his expenses small, but increases them, if the returns are sufficiently large. So here. A localized economy may give rise to a momentary pleasure, but there is no lasting satisfaction if the saving can be utilized elsewhere. By being shared the local expenditure is transformed into a general alleviation. The pleasure in the first instance was due to the removal of an inhibition; it finds satisfaction, and the movement comes to rest, only when, by the intervention of the third person, there is general relief through discharge.

With the conception of wit as exhibiting economy in the expenditure of psychic energy, we enter upon the final form of the theory, the relation of wit to dreams and the unconscious. We have already learned that wit resembles dreams in its technique; we now learn that it resembles them in its formation. The process according to Freud—we have to bear in mind his doctrine of the three levels of the psychic—is this: a preconscious (“fore-conscious,” in the translation) thought is left for the moment to unconscious elaboration, and the result is forthwith grasped in conscious perception. Wit is an inspiration. This recourse to the unconscious is at the same time a recourse to the infantile, in which also Freud finds the origin of dreams, and we thereby regain possession of childish sources of pleasure. The reference to the unconscious is seen most clearly in cynical wit. But introspection shows that in other cases also the choice of words is not made by conscious attention and is the better if “the occupation energy of the fore-conscious is lowered to the unconscious.” Freud admits that his hypothesis is not proved; we know as yet too little about the unconscious; this is still virgin soil. Nor is it likely that he would have hit upon the hypothesis but for his previous study of dreams; but that can, of course, be no objection. He is careful, moreover, to

point out the differences between wit and dreams, as well as their resemblances, the most important being that, while dreams are "asocial," wit is of all the psychic functions aiming at pleasure the most social. Finally, after discussing in a separate chapter the relation of wit to the comic, he sums up his whole doctrine as follows: "The pleasure of wit originates from an *economy of expenditure in inhibition*, of the comic from an *economy of expenditure in thought*, and of humor from an *economy of expenditure in feeling*. All three activities of our psychic apparatus derive pleasure from economy. They all strive to bring back from the psychic activity a pleasure which has really been lost in the development of this activity. For the euphoria which we are thus striving to obtain is nothing but the state of a bygone time in which we were on state defray our psychic work with slight expenditure. It is the tow of our childhood in which we did not know the comic, were incapable of wit, and did not need humor to make us happy."

The theory is certainly "organic," and as a point of view valuable. Whether the reference to the unconscious takes us far may be doubted; the unconscious may be regarded as a deposit of the infantile, it may also be regarded as the source of the creative energy of the universe. The crux of Freud's position is his conception of psychic energy. His construction rests on the assumption that the amount of psychic energy expended in the wit which evades a restriction is less than that required to maintain the inhibition. If this assumption is false, the whole construction goes to pieces. What, then, is the evidence for it? The answer is that there is none, at least none that is convincing. And the reason is that we have no means of measuring and comparing amounts of psychic energy. This is not to deny elements of truth in Freud's application of the principle. There certainly is pleasure in release of tension, and there is no reason to doubt that this is one of the sources of pleasure in wit. But when we go from theory to experience, we find all sorts of differences in the activity that goes both to the making and to the appreciation of wit. Some are witty without knowing it; some are quick-witted, others slow-witted; some wit is ready, other wit labored; some wit bubbles up like sparkles in champagne, some is like the brilliancy of precious stones cut and polished with art and care. And so with appreciation. The flash of recognition must indeed be immediate, for surely one of the chief sources of pleasure in wit comes from surprise; but it is not always easy to detect the hidden meanings, the subtle allusions, and to enter fully into

the higher, more intellectual, forms of wit, requires preparedness and concentration. Who shall say whether in a given case more or less energy is demanded to maintain an inhibition which has become habitual, and therefore is not burdensomely felt, or to circumvent it by an unusual intellectual elaboration?

The translation leaves much to be desired. "Fore-pleasure" and "fore-conscious" are literal, but hardly satisfactory, renderings of the German equivalents, "others as" for "other than" (p. 56) perverts the sense, and familiar as we are with "the unconscious," we are hardly yet prepared to admit the operations of a man's "unconscious." And the English in other respects is no better than it should be. We smile at "preponderately" (several times; not, therefore, a misprint), shrug our shoulders at "not much different than," but when we come on such a sentence as, "Like the comic the naïve is found universally and is not made like in the case of wit" (p. 290), we shudder and protest. H. N. GARDINER

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The Effect of Humidity on Nervousness and on General Efficiency.

L. I. STECHER. Arch. of Psychol., 1916, No. 38. Pp. v + 94.

Many casual and uncontrolled observations have been incorporated into scientific discussions because of tradition. The effects of weather conditions are among this great number. It has been believed that certain kinds of weather make corns ache, cause rheumatic pains, prevent good mental and physical work, and give rise to depressions or excitements. The present study shows that as far as the experimental conditions have gone there is no warrant for the conclusion that humidity (20 and 50 per cent.) has any special effect by itself in changing the efficiency of the subjects who were used. The author rightly remarks, however, "that individuals put under certain controlled conditions react or fail to react in certain ways is by no means to be taken as saction for all sorts of uncomfortable ventilation conditions." It is possible, although there is no scientific demonstration of this, that the combination of long-continued humidity, foul air, heat, and perhaps other conditions, may bring about a considerable lowering of efficiency which is not to be determined for any one condition by itself. And, the author concludes that if the effects of long-continued conditions which have been thought to be adverse are to be found it is for physiology to trace these "subtle, long-time ill-effects."

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DISCUSSION

THE MEASUREMENT OF INTELLIGENCE

The recent revision by Terman¹ and his collaborators of the Binet-Simon tests of intelligence has increased the reliability of this method of estimating intelligence and has led to findings of value and of general psychological interest. The revision has involved the examination of approximately 2,300 subjects, but is based on the results of about 1,000 "unselected" cases. The results are stated in terms of "intelligence quotients," which is the name given to the ratios of the "mental" ages (determined by standing in the tests) to the chronological ages of the individuals tested. The distribution of these quotients about their medians is approximately symmetrical at each age from five to fourteen, and the range which includes the middle fifty per cent. of the quotients is found practically constant from 5 to 14 years. From this latter fact the author concludes that "the traditional view that variability in mental traits becomes more marked during adolescence is here contradicted." The actual deviation in months and years (*i. e.*, the gross variability as distinguished from the relative variability which the quotients measure) does, of course, increase with age, and in this sense, children of the adolescent period differ more from each other than children of earlier ages. The questions upon which the extent of variability really depend are: whether or not the increments in mental growth are greater in this period than in the years which precede or follow it, and whether or not the incidence of this added growth impulse comes at such different times in individual cases as to increase the range or extent of individual differences of the period. Both of these questions have been answered affirmatively in studies of the increments of physical stature; and, since there is in general some parallel between bodily and "mental" growth, it has seemed reasonable to anticipate that the same facts would hold for the latter also. It seems probable that the author's results are open to the same statistical error as marked the earlier studies of physical growth, namely, that they are based on averages of different groups of individuals. Wisslar²

¹ *The Measurement of Intelligence*, L. M. Terman (intro. by E. P. Cubberley). Boston: Houghton Mifflin Co., 1916. Pp. xii + 362.

² *Am. Anthropol.*, N. S., Vol. 5.

and Baldwin¹ have shown the necessity of having repeated measurements on the same individuals to determine the facts in regard to the yearly increments in stature. The formerly accepted averages concealed the real extent of variability as they probably also do in this case.

Girls are superior to boys in the tests up to the age of thirteen, but the superiority is slight, amounting at most ages to only 2 or 3 points in terms of the intelligence quotients. Studies in physiological development would have led one to expect greater differences between the sexes.

The intellectual status of an individual in relation to his fellows appears to remain fairly constant during the period of growth. Retests of the same children at intervals of two to four years support this conclusion. In this case the finding is paralleled by the studies of increments in physical growth. Children who are taller than the average in early years tend to maintain the superiority throughout the later years. This gives the striking "railroad" appearance to the charts of individual growth, and indicates that, if the relative position of a child in relation to the average at any given age is known, it is possible to prophesy in the large majority of cases very accurately the height to which the child will grow. It now appears that a similar prophecy can be made in regard to intellectual development. This conclusion has also been indicated by studies of the present writer and his students² which have shown that in a large proportion of cases children maintain the same relative rank in school studies from the elementary school through the high school and college.

Individuals whose intelligence quotients fall below .70 should, according to Terman, be considered feeble-minded. This, while perhaps safe enough as a standard, should always be supplemented by other commonly accepted criteria.

The method adopted for selecting and placing the 36 new tests which are added in this revision is open to some criticism in that it tends to narrow the tests of "intelligence" to closely related abilities. In this connection the much higher correlation of the Binet tests with language and reading tests than with mechanical construction tests found by Thorndike³ is significant. The inter-correlation of the tests in any age group affects the percentage of

¹ U. S. Bur. of Ed., Bull. No. 10.

² *Cp. School Review*, May, 1913.

³ *Psych. Clinic*, Vol. 10, No. 8.

passes which may be taken as standard for a given test as well as the reliability of the median mental age so determined, as has been pointed out in a penetrating article by Truman Kelly.¹

In assigning six tests for each year and counting each test passed as two months in the computation of the total mental age, the assumption is tacitly made that the increase in intelligence in each yearly period is on the average approximately equal. The average or median yearly increment in intelligence becomes the real unit of measurement. Burt² has challenged the correctness of this assumption, and has asked whether anyone would think of measuring physical growth in this way. The comparison is illuminating. It is possible to measure growth in physical stature with considerable accuracy in just this way, since the *average* of yearly increments in stature is sufficiently constant, for at least the years under consideration, to be used as a unit. Yerkes has also "rejected" this method, although he has advanced no evidence for his *ipse dixit* that "the age arrangement of tests is wrong in principle violating the laws of mental development."³ It would be interesting to have some of these "laws of mental development" stated. About two years before this latter statement was published, Pearson,⁴ working with the somewhat limited material of the Swedish psychologist Jaederholm, concluded that "the unit of a year of mental growth receives support from the data as a constant quantity,"⁵ and that it is practically equivalent to the standard deviation of the distributions of intelligence in children for the ages under consideration.

Binet's method does not, however, stand or fall with the determination of this question. It is sufficient for practical purposes to state the position of an individual with reference to a given group of tests, *e. g.*, those which 8-year olds can pass on the average and those which 7-year olds can not pass. This does not involve materially the question of the amount of difference in intelligence which separates these groups, and certainly not that of *how much* superior a given group or a given test is to another group or test. These problems are, however, involved throughout the whole scheme of weighting in the so-called point-scale,⁶ with which Yerkes wishes to replace the Binet scale, although, since the weight-

¹ *Psych. Rev.*, Vol. 23, pp. 407 ff.

² *Eugenics Rev.*, Vol. V.

³ *J. of Ed. Psych.*, Vol. VII, p. 163.

⁴ *Questions of the Day and Fray*, No. IX. Cambridge University Press, 1914.

⁵ *Ibid.*, p. 44.

⁶ *A Point Scale for Measuring Mental Ability*, R. M. Yerkes, J. W. Bridges, and R. S. Hardwick. Warwick & York, 1915. A curious slip is made in a footnote to

ing is purely arbitrary, the bearing of the problems seems not to have been recognized. For example, in Test 2, Response to Binet Pictures, "for each picture 1 point is credited for enumeration, 2 points for description, or 3 for interpretation, as the case may be."¹ Either this means that interpretation is as much superior to description as the latter is to enumeration, or that interpretation should count three times as much as enumeration in the measurement of intelligence; but for evidence as to the first of these suppositions or reason for the second, *e. g.*, as to why 3 times rather than 10 or 20 times, the reader will look in vain. With data now available, it is possible to determine the first of these relationships, at least approximately and to establish units of measurement either in terms of age or group variability (sigma differences). An arbitrary method of weighting has, therefore, little justification at the present time, and, unless, perchance, its sponsors are good guessers, may be pernicious in its effects when applied to such an important undertaking as the delimitation of the feeble-minded.²

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ACTIVITIES OF CLINICAL PSYCHOLOGISTS

The following report and recommendations were adopted by the New York Psychiatric Society and ordered forwarded to the leading medical and psychological journals for publication.

At a meeting of the New York Psychiatric Society held December 6, 1916, a committee was appointed to inquire into the activities of psychologists and more particularly of those who have termed themselves "clinical psychologists" in relation to the diagnosis and treatment of abnormal conditions. This committee desires to make the following report.

We have been greatly impressed by the earnestness and success with which psychologists are endeavoring to make their science serviceable in dealing with the practical affairs of everyday life. We wish to record our belief in the wide usefulness of the application of psychological knowledge and of the findings of certain psycho-

chapter 2. "The numbers there given in parenthesis indicate the Binet tests, *if any*, [italics added by the present writer] of the same or similar character."—of the 20 tests employed, 19 are thus referred to.

¹ *Ibid.*, p. 17. Examples may be multiplied. For example, a total of 6 points is credited for description and 4 for detecting the missing parts of pictures (both 2-year tests); 3 points for "aesthetic judgment" of pictures (a 5-year test); 2 for drawing a diamond (a 7-year test); and 2 for the comparison of two weights (a 5-year test), etc.

² Note the remarkable conclusions of M. T. Woolley with the point scale as to the "startlingly high" percentage of feeble-mindedness in 18-year old industrial workers—46.5% of boys and 42.5% of girls, or by a more conservative standard 25.5%! (*The Survey*, Nov. 4, 1916.)

logical tests in such fields as the modification of educational methods with reference to individual differences, the vocational problems presented in various special industrial operations, the development of scientific methods in advertising, salesmanship and other means of business appeal and in the investigation of such special problems as the relation of environmental factors to the quality and quantity of the output of the individual. We feel that the results to be attained in these fields justify the belief that the widening of the scope and application of psychological knowledge will make psychology one of the most useful of the social sciences instead of a narrow field for study and research with but little actual contact with the practical problem of life.

We have observed with much distrust, however, the growing tendency of some psychologists, most often, unfortunately, those with the least amount of scientific training, to deal with the problem of diagnosis, social management and institutional disposal of persons suffering from abnormal mental conditions. We recognize the great value of mental tests in determining many questions which arise in dealing with such patients but we have observed that most of such work which is being done by psychologists and particularly by persons whose training in psychology is confined entirely to learning how to apply a few sets of these tests, is carried on in schools, courts, correctional institutions and so-called "psychological clinics," quite independently of medically trained workers who are competent to deal with questions involving the whole mental and physical life of the individual.

We believe that the scientific value of work done under such conditions is much less than when carried on in close coöperation with that of physicians and that serious disadvantages to patients suffering from mental disorders and to the community are likely to result and, in many instances which have come to our attention, have resulted. This is especially true when the mental condition of the patients examined involves questions of diagnosis, loss of liberty or educational issues more serious than redistribution of pupils or rearrangement of courses of study. In spite of these facts two States have enacted laws permitting judges to commit mentally defective persons to institutions upon the so-called expert testimony of "clinical psychologists" regarding the abnormal mental conditions from which patients are alleged to suffer. We believe that the examination upon which a sick person is involuntarily committed to permanent institutional custody is one of the most serious responsibilities assumed by physicians and that in no cases whatever should it be entrusted to persons without training enabling them to take into consideration all the medical factors involved. The same is true of mental examinations of juvenile delinquents and criminals whose whole careers depend, in many cases, upon the determination of their condition.

We desire to make the following specific recommendations:—

1. We recommend that the New York Psychiatrial Society affirm the general principle that the sick, whether in mind or body, should be cared for only by those with medical training who are authorized by the state to assume the responsibility of diagnosis and treatment.
2. We recommend that the Society express its disapproval and urge upon thoughtful psychologists and the medical profession in general an expression of disapproval of the application of psychology to responsible clinical work except when made by or under the direct supervision of physicians qualified to deal with abnormal mental conditions.
3. We recommend that the Society disapprove of psychologists (or of those who claim to be psychologists as a result of their ability to apply any set of psychological tests) undertaking to pass judgment upon the mental condition of sick, defective or otherwise abnormal persons when such findings involve questions of diagnosis, or affect the future care and career of such persons.

PSYCHOLOGY AND PSYCHIATRY

The recently adopted report and resolutions of the New York Psychiatric Society which are printed in this number of the *BULLETIN*, deserve more than passing notice. They suggest several important points of interest to all psychological investigators, as well as to those who are termed "clinical" psychologists.

The relations of psychology and psychiatry are brought forward as matters for discussion, even though the recommendations of the New York Society may be satisfying to its members. The report and recommendations are paralleled by a similar equally one-sided resolution regarding psychological diagnosis adopted by the American Psychological Association at its 1915 meeting (see the *BULLETIN*, 1916, 13, page 49). Both of these actions indicate an appreciation of some mutual relationship between psychology and psychiatry, but at the same time they show an equal amount of mutual distrust of the capabilities of the followers of the other subject. The psychiatrist would have the psychologist barred from dealing with abnormal persons, and the psychologist insists that the psychiatrist is not competent to give and to interpret mental tests.

The present is a most opportune time for a careful consideration of the independence, the interdependence, the correlation and coordination, and the responsibilities of different but allied lines of work. It is to be hoped that a way may be found to bring the psychiatrists to a better understanding of the value to them of psychology, and to bring the psychologists to a better appreciation of the importance to them of psychiatry. It is also important that points of misunderstanding or of disagreement be carefully considered together, not by each of the biased groups for itself alone. With the country at war, and needing the best work of all, it would be most fitting if psychiatrists and psychologists should get together, throw away as far as possible their usual intolerances and prejudices, and see if there can be found a cooperative working scheme. Differences may arise and be unavoidable, but in most cases they will be minor if the two sides are examined. The writer would be glad to see such a conference inaugurated, and perhaps continued from year to year or as occasion appears to demand it. We could expect to be rid finally of the psychiatric reproaches that psychology is unpractical and at the same time

that it is trying to usurp some of the functions of the practical psychiatrists. We might also hope to have certain apparent inconsistencies in the report and recommendations of the New York society explained. Some of the points brought up in that report may be looked at from different angles.

"Expert testimony" is probably the darkest side of medicine. Some have not hesitated to call it disreputable. When a so-called medical psychiatrist makes a psychiatric diagnosis of "brain storm," when two so-called psychiatric experts, each with the same facts (hypothetical question), testify respectively that an individual is "sane" and "insane," it should not be possible for psychiatrists to affirm that physicians as a class are competent to make proper diagnoses and are the only ones "qualified to deal with abnormal mental conditions." If some states have decided to utilize psychologists as experts regarding the normality or abnormality of the mental states of individuals it is conceivable that it was done because previous medical expert testimony was not satisfactory. It might also indicate that the West is more progressive than the East.

While it may be proper to admit that the psychologist who is ignorant of physical defects and their possible relations to mental abnormalities goes beyond his legitimate field in making a definite mental diagnosis of feeble-mindedness or of a psychosis, unless he be legally authorized to do so, it is equally true that he may be able to determine the presence of a mental abnormality just as well as the ophthalmologist may be able to discover a visual defect. The visual defect may accompany an apparent mental abnormality but it may not be the cause of it. The mental abnormality may be due to certain physical disturbances, or it may be "ideopathic." It is doubtless the function of the psychiatrist to take the report of mental abnormality with that of Argyll-Robertson pupils and any other data and determine or diagnose the condition as a whole. It should not be thought, however, that the psychiatrist alone is competent to determine the mental state of a patient. If his duties consist in knowing all of the physical side and all of the mental side, he is the nearest approach to that rare and fast-disappearing race of physicians who are specialists in the skin and its contents. It may be that the mental expert, as distinct from the psychiatrist, has a place in the general scheme of examination and investigation (for diagnosis and treatment) of mental abnormalities. It may also be that some of the abnormalities of which psychiatrists talk as fields for the psychiatric expert, such as criminality, prostitution,

vagabondage, etc., do not rightly belong to their field. It is of interest to note in this connection that the report uses the descriptive term "abnormal" rather than "pathological," and if the term is used correctly it would mean that the intellectually superior are psychiatric material as well as the intellectual dwarfs.

Those who are competent to deal with questions "involving the whole mental and physical life of the individual" are few, and it is doubtful that they can by themselves do all the necessary work of a psychological nature and of expert testimony for which they might properly be used. A responsible and well-informed psychiatrist told the writer not long ago that there were not more than 150 competent psychiatrists in this country. A few days later an equally eminent specialist in the same line of work estimated that the number was certainly not greater than 100, and more likely nearer 50. If the largest of the three estimates be nearly correct it would appear that there might be functions for psychologists in relation to certain practical problems, even though these functions do not include those of final judgment regarding the advisability of incarceration of the mentally abnormal.

The large percentages of diagnostic errors, which have been reported in recent years in the medical press, are evidence that relatively few physicians are competent to determine many of the anatomical and physiological abnormalities of patients for which work they have received a great amount of training. Special training in mental facts and in psychological methods has not been part of the medical school course, and relatively few physicians have attempted to become acquainted with them except in a superficial way or in a very narrow field. They would probably admit that a similar way of becoming acquainted with typhoid fever is entirely inadequate, and psychologists may well wonder what innate qualities physicians possess, or what special observation powers they have, or the kinds of instruction they receive which make them competent to deal with the whole mental life of an individual. It has not infrequently been assumed that no training in normal psychology is needed for the understanding of abnormal mental conditions. On the contrary, for the appreciation of diseased bodily conditions it is considered necessary to study anatomy, physiology, pharmacology, bacteriology, and pathology as well as to come in close contact with numerous disease forms. Is this reasoning, we may ask, an indication of adherence to the doctrine of psychophysical parallelism or only an ordinary form of prejudice or bad logic?

One further point indicating the poor opinion prevalent among psychiatrists with respect to psychologists is shown in the composition of the National Committee of Mental Hygiene (founded in 1909). This Committee works for the "conservation of mental health." More than one third of this Committee are physicians, of which a large number are psychiatrists. The remainder are college presidents, bankers, merchants, women of wealth, social workers, professors of the social sciences, with two professors of education as the nearest approach to any recognition of psychology as one of the sciences concerned with mental matters. (The data were taken from the inside cover of the first number of *Mental Hygiene* (January, 1917). A more recent letter head, just received, now shows one psychologist among the 90 members of this Committee.) Should psychologists interpret this to mean that it is the opinion of the large number of psychiatrists on this Committee that a psychologist has less interest and less function in the conservation of mental health than a college president, than a pathologist, than a surgeon, or than any of the other representatives of different subjects of study and research?

SHEPHERD IVORY FRANZ

REPORT OF A CONFERENCE ON THE REEDUCATION AND REHABILITATION OF MAIMED AND CRIPPLED SOLDIERS

A conference on reeducation and rehabilitation of the maimed, crippled and otherwise disabled by war, has been held under the auspices of the General Medical Board of the Council of National Defense. The meetings were attended by the following: Dr. James Bordley, Jr., Baltimore (ophthalmology); Dr. John Staige Davis, Baltimore (plastic surgery); Mr. C. R. Dooley, Pittsburgh (vocational education); Dr. Shepherd Ivory Franz, Washington (neurophysiology) *Chairman*; Mr. Frank B. Gilbreth, Providence (management engineering); Dr. R. W. Lovett, Boston (orthopedic surgery); Dr. Harris P. Mosher, Boston (otology); Dr. T. H. Weisenburg, Philadelphia (neurology); and Dr. William A. White, Washington (psychiatry).

The report and recommendations of the conference which follow were based upon a knowledge of many of the conditions which were encountered in England, Canada, France, and Germany, and references are made below to some of these facts.

1. It is believed that the work of a committee on reëducation and rehabilitation of the maimed and crippled will be most effectively performed if one or more medical officers be designated to coöperate with it.

2. Activity with respect to reëducation work should begin as early as possible. This should be by intensive instruction of medical officers, in medical specialties, at the present and future army medical camps or by sending selected squads to established medical schools for short terms of special instruction.

The medical specialties that have direct bearing upon the problems of reëducation are: Orthopedic surgery, plastic surgery, neurology, psychiatry, ophthalmology, and otology.

3. If reëducation is to be carried out with the best results, it is desirable that special treatment of the wounded should be carried out under the direction of specialists as early as possible.

4. The establishment of reconstruction hospitals, or hospital schools, for the repair of cripples and disabled persons is essential. These institutions should preferably be widely distributed, and should be large rather than small. It is preferable to utilize existing institutions, when suitable or adaptable for the work, rather than to build others.

Hospital schools for crippled are particularly adapted for such use, having beds, instrument shops, and industrial schools. To supplement the three state institutions, Massachusetts, Minnesota, and Nebraska, now available, and such similar private institutions which may later be offered is necessary. Public hospitals and other public institutions may be utilized for the purpose.

Convalescent homes which may be separate from hospitals will also be required. Large country places, vacant country hotels, etc., would be suitable. The institutions should be under military control.

The conference would recommend a census of suitable institutions, which would be available in different parts of the country.

In France in April, 1916, there were about 50,000 amputated and otherwise disabled soldiers needing medical reconstruction and reëducation. Biesalski has estimated that in Germany 40,000 cripples were produced in the first few months of the war. From 70 to 80 per cent. of the wounded returned to Canada have needed reconstruction and reëducation work.

5. Relatively few of the cripples can return to their former occupations because of their disabilities, and they must be taught new ones.

The experience of other countries now at war shows that careful examinations, physical and mental, must be made of the crippled and maimed as a basis for the determination of the individual capabilities for reëducation. The conference believes that careful analysis should be made of different occupations to determine the anatomical characteristics necessary for them, as a guide for those who will have charge of vocational education. Careful attention should also be given to the matter of modifying the occupation to fit the individual.

In England scientific examination of the men was not made at first, and many cripples were permitted to undertake to learn occupations for which they were not fitted physically, mentally or by previous experience. France has also had the same experience.

6. The conference believes that every disabled soldier, whether or not unable to follow his former occupation, should be kept under military discipline until the completion of physical reconstruction and reëducation.

It has been found that many disabled soldiers in European countries would not undertake reëducation, and apparently preferred to be permitted to remain helpless, and, thus, a social liability. Every man should be compelled to undertake to learn an occupation that will enable him to be self-supporting or partly self-supporting. This is quite apart from the consideration of pensions, a matter which the conference was not called upon to discuss.

7. Reëducation must be a coöperative endeavor of all the special interests involved: medical, educational and social.

8. A committee on vocational education has been formed under the auspices of the Council of National Defense. The work of that committee and that of a committee on the reëducation and rehabilitation of the maimed and crippled where they meet should be intimately correlated.

9. The conference feels that as great publicity as is consistent with public policy should be given to the work of reëducation and rehabilitation of the maimed and crippled. The public should be taught that the cripple is not to be considered a total economic loss, but should realize that if suitably trained he will be an economic asset.

The following specific recommendations of the conference were made:

1. That a permanent committee be appointed to carry out whatever plan may be adopted, and

2. That this committee should contain representatives of the various medical, educational, and social interests concerned, and should comprise in its membership representatives of the Army, the Navy, the Public Health Service, and the American Red Cross.

The report and the recommendations of the conference were taken under consideration by the Executive Committee of the General Medical Board.

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